SCC eFile 2012 ANNUAL REPORT 212531859 COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION					
1.) CORPORATION NAME:			DUE DATE:	8/31/2012	
<b>CNA National Warranty Corpo</b>	ration				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM			SCC ID NO: <b>F1719352</b>		
4701 COX RD STE 301			5.) STOCK II	NFORMATION	
GLEN ALLEN, VA 23060			CLASS	AUTHORIZED	
3.) CITY OR COUNTY OF VA REGI HENRICO COUNTY	STERED OFFICE:		COMMON	1,000	
4.) STATE OR COUNTRY OF INCORPORATION: AZ					
6.) PRINCIPAL OFFICE ADDRESS:					
ADDRESS: 4150 N DRINKWATER BLVD STE 400					
CITY/ST/ZIP: SCOTTSDALE, AZ 85251					
7.) DIRECTORS AND PRINCIPAL C	OFFICERS: All directors ar may be design	nd principal nated as bo	officers must b th a director an	e listed. An individual d an officer.	
		X OFFIC	CER	X DIRECTOR	
NAME: TITLE:	JOEY H BECKER CEO PRESIDENT				
ADDRESS:	4150 N DRINKWATER BLVD ST	E 400			
CITY/ST/ZIP/CO:	SCOTTSDALE, AZ 85251	X OFFIC	`ED	DIRECTOR	
NAME:	RICHARD C EHLERS, JR	X OFFIC	)EN	DIRECTOR	
TITLE:	VICE PRESIDENT				
ADDRESS:	333 S WABASH AVE				
CITY/ST/ZIP/CO:	CHICAGO, IL 60604				
NAME:	DANIDALI NI DICE	X OFFIC	CER	DIRECTOR	
TITLE:	RANDALL N RIFE VICE PRESIDENT				
ADDRESS:	4150 N DRINKWATER BLVD ST	E 400			
CITY/ST/ZIP/CO:	CHICAGO, IL 60604				
		X OFFIC	CER	DIRECTOR	
NAME: TITLE:	MARY A RIBIKAWSKIS				
ADDRESS:	SECRETARY 333 S WABASH AVE				
CITY/ST/ZIP/CO:	CHICAGO, IL 60604				
		X OFFIC	CER	DIRECTOR	
NAME:	DAWN KANESHIGE				
TITLE: ADDRESS:	ASST SECRETARY	T 400			
CITY/ST/ZIP/CO:	4150 N DRINKWATER BLVD ST SCOTTSDALE, AZ 85251	E 400			
		X OFFIC	CER	DIRECTOR	
NAME:	DAVID B LEHMAN				
TITLE:	ASST SECRETARY				
ADDRESS: CITY/ST/ZIP/CO:	333 S WABASH AVE CHICAGO, IL 60604				

		χ OFFICER	χ DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN LOUGHLIN SVP/CFO 333 S WABASH AVE CHICAGO, IL 60604				
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DONALD OLIVER EVP 4150 N DRINKWATER BLVD S SCOTTSDALE, AZ 85251	X OFFICER	X DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LAWRENCE J BOYSEN SVP 333 S WABASH AVE CHICAGO, IL 60604	X OFFICER	DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT J GROB AVP 333 S WABASH AVE CHICAGO, IL 60604	X OFFICER	DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRIAN J LOEBACH DIRECTOR 333 S WABASH AVENUE CHICAGO, IL 60604	OFFICER	X DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALBERT J. MIRALLES, JR. TREASURER 333 S WABASH AVE CHICAGO, IL 60604	X OFFICER	DIRECTOR		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.					
/s/ MARY A RIBIKAWSKIS SIGNATURE OF DIRECTOR/OFFICE LISTED IN THIS REPORT	MARY A RIBIKAWSKIS, SECRETARY PRINTED NAME AND COR	RPORATE	8/21/2012 DATE		
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.					